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PTO/SB/21 (08-00)

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	08/653,294
Filing Date	May 24, 1996
First Name and Inventor	Carol A. CLAYBERGER, et al
Group Art Unit	1644
Examiner Name	M. Dibrino
Attorney Docket Number	286002020023

Total Number of Pages in This Submission

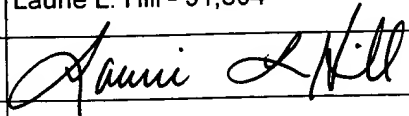
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ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
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<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)
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<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	MORRISON & FOERSTER LLP Laurie L. Hill - 51,804
Signature	
Date	June 30, 2003

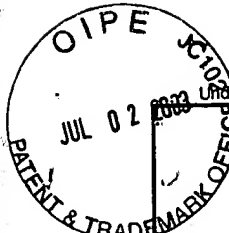
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(Ruth Saskowski)

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FEE TRANSMITTAL for FY 2003 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	08/653,294
TOTAL AMOUNT OF PAYMENT (\$)		Filing Date	May 24, 1996
840.00		First Named Inventor	Carol A. CLAYBERGER, et al
		Examiner Name	M. Dibrino
		Group Art Unit	1644
		Attorney Docket No.	286002020023

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Deposit Account Number: 03-1952																																													
Deposit Account Name: Morrison & Foerster LLP																																													
The Commissioner is hereby authorized to: (check all that apply)																																													
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments																																													
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FEE CALCULATION																																													
1. BASIC FILING FEE																																													
<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td></td><td></td><td>1001</td><td>750</td><td>Utility filing fee</td><td></td></tr><tr><td></td><td></td><td>1002</td><td>330</td><td>Design filing fee</td><td></td></tr><tr><td></td><td></td><td>1003</td><td>520</td><td>Plant filing fee</td><td></td></tr><tr><td></td><td></td><td>1004</td><td>750</td><td>Reissue filing fee</td><td></td></tr><tr><td></td><td></td><td>1005</td><td>160</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5">SUBTOTAL (1)</td><td>0.00</td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid			1001	750	Utility filing fee				1002	330	Design filing fee				1003	520	Plant filing fee				1004	750	Reissue filing fee				1005	160	Provisional filing fee		SUBTOTAL (1)					0.00		
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																													
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Laurie K. Hill	Registration No. (Attorney/Agent)	51,804
Signature		Telephone	(858) 720-5100
		Date	June 30, 2003

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